Positive Alternatives 2014 - 15 Quarterly Update

Grantee: Catholic Charities of the Archdiocese of St. Paul and Minneapolis

Goal: Support, encourage and assist women in carrying their pregnancies to term and caring for their babies after birth(caring for a baby after birth could also include making an adoption plan)

For the period: January – March 2015

Activity or Service	Activity or Service Description Major Work Plan Activities	Work Plan Count	Program Progress and Accomplishments Report the progress and accomplishments made this period on each activity.	Report Count
Administrative Activities	Prepare an evaluation plan		Continuing to capture information used in last evaluation report.	
Car Seat Program	Provide certified car seat instruction and testing; provide car seats to Positive Alternative clients	20	Provided car seat instruction to 11 women and 4 partners. Provided 2 Positive Alternative funded car seats and 9 UCare funded car seats.	15
Case Management Services	Provide pregnant clients on- going support in office, home or telephone follow-up; provide education, classes and support groups; Provide home visit support to newly delivered mothers, babies and fathers	500	The number of clients has decreased and therefore the number of services has decreased as well.	466
Crib Distribution/ Sleep Safety Education	Distribute cribs from Cradle of Hope and provide safe sleep education to those recipients as well as other clients	25	Provided safe sleep information for 23 women and 4 of their partners. Distributed 6 pack and plays from Cradle of Hope.	27

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Fatherhood Program	Include fathers as part of pregnancy support services; Provide support groups for fathers.	50	42 fathers participated in services 81 times in the last quarter.	81
Financial Assistance	Assist women with applying to other agencies for medical assistance, financial assistance, and food support	25	21 women were assisted specifically with Medical Assistance. 19 clients were assisted to access other agencies for doula support, energy assistance, WIC appointments, food support, and other items.	40
Interpreter	Provide interpretation for prenatal and postpartum clinic visits, ultrasound visits, and case management appointments in six languages	95	Languages included Amharic, Hmong, Spanish, Thai, Oromo, Vietnamese, Somali, and Karen. 79 of the 96 visits were interpreted by staff and outside interpreters were utilized in only 17 visits. See the 'challenges and comments' section.	96
Material Support	Provide baby clothes, diapers, layettes and donated equipment	20	Provided 27 clients with items such as baby clothes, maternity clothes, diapers, baby equipment, and layettes multiple times.	27
Mental Health	Screen women and provide access to Mental Health care	15	Mental health, especially depression, continues to be a risk factor for a significant number of our clients. We have increased screening procedures so that more clients are receiving screening routinely.	25
Nutrition	Provide prenatal vitamins, folic acid, assistance with prescriptions, and food	40	Each new prenatal client is given prenatal vitamins at their first medical visit. Numbers of new clients are declining.	28
Parenting Education	Provide Newborn care and Breastfeeding classes to mothers and their partners; provide education on post-partum depression	35	This important topic is covered during the 36 week visit and in both CBE and Newborn Care classes. See the 'challenges and comments' section.	28

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Pregnancy Education	Provide certified Child Birth Educator (CBE) to teach/facilitate class to expecting mothers and fathers; Provide education on fetal development and healthy pregnancy behaviors	40	Provided CBE to 5 women and 1 partner. Provided education on fetal development and healthy pregnancy behaviors to 28 women. See the 'challenges and comments' section.	34
Pregnancy Testing	Provide pregnancy tests	12	Requests for pregnancy tests increased over last quarter.	19
Prenatal Medical Care	Provide prenatal medical and nursing care for pregnant women including lab work, exams, information and education	430	Our certified nurse midwives provided care in 78% of these visits. The clinic has seen a decline in the number of patients of the last year. See the 'challenges and comments' section.	307
Provide Necessary Services Assessments Only	Staff provides clients only intake assessments, information on, referral to and assistance with securing necessary services		Four clients were being seen at other medical clinics and requested either birth parent counseling or social services only support through Catholic Charities.	4
Transportation	Assist women in accessing healthcare by providing taxi or bus vouchers to/from appointments	10	Assisted 5 women with 12 cab rides and 1 with bus tokens.	13
Ultrasound	Provide ultrasound services to pregnant women	75	New client appointments are lower than usual with the result that ultrasounds are provided to a lower number of women. See the 'challenges and comments' section.	52

Maternal and Child Health Initiative Task Force Strategies	No.
Number of women who received car seats and car seat safety education from a PA funded program activity	2
Number of women who received car seat safety education only from a PA funded program activity	9
Number of women who received child abuse prevention education from a PA funded program activity	23
Number of women who received abusive head trauma (shaken baby) prevention education from a PA funded program activity	23
Number of women who received a baby bed, crib, or pack-n-play and sleep safety education from a PA funded program activity	0
Number of women who received sleep safety education only from a PA funded program activity	23

Challenges: The number of clients served has declined. We attribute this to the increased number of women who have insurance coverage and are able to secure care closer to their homes. Efforts are underway to increase awareness of our clinic in the community.

Comments: Although insurance coverage has been mandated for over a year, a surprising number of clients still begin services with no insurance. Last year the number of deliveries remained steady but this year we are seeing a decline in that number as well. The number of Hmong and Caucasian women visiting our clinic has declined over the last year. One theory is that Caucasian and Hmong women are more likely to have insurance when they become pregnant so they can begin their care at a clinic near their home. More analysis will have to be done to see if facts support this theory.